

Confidentiality Requested:

Yes No

Kansas Corporation Commission Oil & Gas Conservation Division

1180996

Form ACO-1
August 2013
Form must be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License #			API No. 15		
Name:			Spot Description:		
Address 1:			Sec.	TwpS. R	East _ West
Address 2:			F6	eet from North /	South Line of Section
City:	State: Z	ip:+	Fe	eet from East /	West Line of Section
Contact Person:			Footages Calculated from	Nearest Outside Section C	Corner:
Phone: ()			□ NE □ NW	V □SE □SW	
CONTRACTOR: License #			GPS Location: Lat:	, Long:	
Name:				(e.g. xx.xxxxx)	(e.gxxx.xxxxx)
Wellsite Geologist:			Datum: NAD27	NAD83 WGS84	
Purchaser:			County:		
Designate Type of Completion:			Lease Name:	W	ell #:
	e-Entry	Workover	Field Name:		
	_		Producing Formation:		
☐ Oil ☐ WSW ☐ D&A	☐ SWD	∐ SIOW ∏ SIGW	Elevation: Ground:	Kelly Bushing:	
	GSW	Temp. Abd.	Total Vertical Depth:	Plug Back Total D	epth:
CM (Coal Bed Methane)	dow	Temp. Abd.	Amount of Surface Pipe Se	et and Cemented at:	Feet
☐ Cathodic ☐ Other (Co	ore. Expl., etc.):		Multiple Stage Cementing	Collar Used? Yes	No
If Workover/Re-entry: Old Well I			If yes, show depth set:		
Operator:			If Alternate II completion, c	cement circulated from:	
Well Name:			feet depth to:	w/	sx cmt.
Original Comp. Date:					
Deepening Re-perf	J	ENHR Conv. to SWD	Drilling Fluid Managemer	nt Plan	
Plug Back	Conv. to G		(Data must be collected from to		
Commingled	Permit #		Chloride content:	ppm Fluid volume	: bbls
Dual Completion			Dewatering method used:_		
SWD			Location of fluid disposal if	hauled offsite:	
ENHR	Permit #:				
GSW	Permit #:		Operator Name:		
			Lease Name:		
Spud Date or Date R	eached TD	Completion Date or	Quarter Sec	TwpS. R	East West
Recompletion Date		Recompletion Date	County:	Permit #:	

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY
Confidentiality Requested
Date:
Confidential Release Date:
Wireline Log Received
Geologist Report Received
UIC Distribution
ALT I III Approved by: Date:

Page Two



Operator Name:				Lease N	Name: _			Well #:		
Sec Twp	S. R	East	West	County	:					
INSTRUCTIONS: Shopen and closed, flow and flow rates if gas to	ing and shut-in pressu	ires, whe	ther shut-in pre	ssure reac	hed stati	c level, hydrosta	tic pressures, bott			
Final Radioactivity Log files must be submitte						gs must be ema	iled to kcc-well-lo	gs@kcc.ks.go	v. Digital elec	tronic log
Drill Stem Tests Taken (Attach Additional S		Ye	es No		L		on (Top), Depth an		Samp	
Samples Sent to Geol	ogical Survey	_ Ye	es No		Nam	е		Тор	Datur	n
Cores Taken Electric Log Run		Y€								
List All E. Logs Run:										
				RECORD	☐ Ne					
				conductor, su	rface, inte	ermediate, producti			T	
Purpose of String	Size Hole Drilled		e Casing (In O.D.)	Weig Lbs./		Setting Depth	Type of Cement	# Sacks Used	Type and P Additiv	
			ADDITIONAL	CEMENTIN	NG / SQL	JEEZE RECORD				
Purpose:	Depth Top Bottom	Туре	of Cement	# Sacks	Used		Type and P	ercent Additives		
Perforate Protect Casing	Jop Zollow									
Plug Back TD Plug Off Zone										
1 ag on zono										
Did you perform a hydrau	ılic fracturing treatment o	n this well?	•			Yes	No (If No, ski	p questions 2 ar	nd 3)	
	otal base fluid of the hydra		J	,	0		_ , ,	p question 3)	(# 100 t)	
Was the hydraulic fractur	ing treatment information	submitted	to the chemical o	disclosure re	gistry?	Yes	No (If No, fill	out Page Three	of the ACO-1)	
Shots Per Foot			D - Bridge Plug Each Interval Perf				cture, Shot, Cement			Depth
	. ,							,		
TUBING RECORD:	Size:	Set At:		Packer At	t:	Liner Run:				
							Yes No			
Date of First, Resumed	Production, SWD or ENH	IR.	Producing Meth Flowing	nod:	g 🗌	Gas Lift C	Other (Explain)			
Estimated Production Per 24 Hours	Oil B	bls.	Gas	Mcf	Wate	er Bl	ols. G	as-Oil Ratio	Gr	ravity
DISDOSITIO	ON OF GAS:			METHOD OF	COMPLE	TION:		PRODUCTIO	ON INTERVAL:	
Vented Sold			Open Hole	Perf.	Dually	Comp. Con	nmingled	THODOUTIC	ZIV IIV I LTIVAL.	
(If vented, Sub			Other (Specify)		(Submit)	ACO-5) (Subi	mit ACO-4)			

DRILLERS LOG S. 28 T. 22 R. 16 API NO: 15 - 031 - 23744 - 00 - 00 <u>E.</u> W. OPERATOR: D. E. EXPLORATION INC. LOCATION: NE NW SW NE COUNTY: COFFEY ADDRESS: P.O. BOX 128, WELLSVILLE, KS 66092 ELEV. GR.: 1015 DF: KB: WELL#: RI - 2A LEASE NAME: FLAKE FOOTAGE LOCATION: 3750 FEET FROM (N) <u>(S)</u> LINE 2200 FEET FROM LINE (E)(W) CONTRACTOR: FINNEY DRILLING COMPANY GEOLOGIST: DOUG EVANS SPUD DATE: TOTAL DEPTH: 1110 11/19/2013 P.B.T.D. DATE COMPLETED: 11/21/2013 OIL PURCHASER: COFFEYVILLE RESOURCES CRUDE TRANSPORTATION CASING RECORD REPORT OF ALL STRINGS - SURFACE, INTERMEDIATE, PRODUCTION, ETC. PURPOSE OF STRING SIZE HOLE | SIZE CASING SET (in WEIGHT TYPE SETTING DEPTH SACKS **TYPE AND % ADDITIVES** O.D.) LBS/FT DRILLED CEMENT SURFACE: 12.2500 19 40 OWC 57 SERVICE COMPANY PRODUCTION: 5.8750 2.8750 Brd 6.5 1101.65 OWC SERVICE COMPANY

\A	FI		1	OG
· v		400		

CORES: # RECOVERED:

ACTUAL CORING TIME:

RAN: 1 - FLOAT SHOE

1 - BAFFLE

3 - CENTRALIZERS

1 - CLAMP

TOD DOU	TOP	BOTTOM
TOP SOIL	0	3
CLAY	3	14
SAND & GRAVEL	14	30
SHALE	30	200
LIME	200	249
SHALE	249	331
LIME	331	354
SHALE	354	372
LIME	372	465
SHALE	465	471
LIME	471	475
SHALE	475	481
LIME ,	481	486
SHALE	486	509
LIME	509	517
SHALE	517	520
LIME ,	520	580
SHALE	580	586
LIME	586	607
SHALE	607	610
LIME	610	612
SHALE	612	615
LIME	615	633
SHALE	633	788
LIME	788	802
SHALE	802	809
LIME	809	819
SHALE	819	825
LIME	825	827
SAND & SHALE	827	875
LIME	875	880
SHALE	880	898
LIME	898	899
SHALE	899	901
LIME	901	905
SAND & SHALE	905	919
LIME	919	924
SHALE	924	952
LIME	952	956
SAND & SHALE	956	990
CAP LIME	990	991

FORMATION	TOP	BOTTO
SHALE	991	992
CAP LIME	992	993
OIL SAND	993	1007
SAND & SHALE	1007	1053
LIME	1053	1056
SHALE	1056	1063
LIME	1063	1065
SHALE	1065	1110 T.D.
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REMIT TO

Consolidated Oil Well Services, LLC Dept. 970 P.O. Box 4346 Houston, TX 77210-4346

MAIN OFFICE P.O. Box 884 Chanute, KS 66720 620/431-9210 • 1-800/467-8676 Fax 620/431-0012

INVOICE

Invoice #

264164

Invoice Date:

11/22/2013

Terms: 0/0/30,n/30

Page

1

ALTAVISTA ENERGY INC 4595 K-33 HIGHWAY

P.O. BOX 128

WELLSVILLE KS 66092

(785)883 - 4057

FLAKE RI-2A

44871

NE 28-22-16

11-19-2013

KS

====	==========	=======================================	========	========	========
Part) 1124 1118B 1111 1110A	Number	Description 50/50 POZ CEMENT MIX PREMIUM GEL / BENTONITE SODIUM CHLORIDE (GRANULA KOL SEAL (50# BAG)	Qty 40.00 68.00 78.00 200.00	Unit Price 11.5000 .2200 .3900 .4600	Total 460.00 14.96 30.42 92.00
495 495 495 558 675	Description CEMENT PUMP (S EQUIPMENT MILE CASING FOOTAGE TON MILEAGE DE	LIVERY	Hours 1.00 .00 40.00 83.70 1.00	Unit Price 870.00 4.20 .00 1.41 90.00	Total 870.00 .00 .00 118.02 90.00

Parts: 597.38 Freight: .00 Tax: 36.74 AR 1712.14 Labor: .00 Misc: .00 Total: 1712.14

Sublt: .00 Supplies: .00 Change: .00

Signed

Date



264164

TICKET NUMBER 44871

LOCATION Oxtawa KS

FOREMAN Fred Mader

PO Box 884, Chanute, KS 66720 620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT

Well suille JOB TYPE SUNFOCE HO CASING DEPTH 40 DE BLURRY WEIGHT SL DISPLACEMENT 16 BBLDE REMARKS: Hold Crew COSING OLEON STORY ACCOUNT QUANITY OF STORY STORY 1	TATE ZIPC KS 66 COLE SIZE 12% RILL PIPE LURRY VOL SPLACEMENT PSI SAFETY YM KALS-ALL DY 111-MA UNITS	HOLE DEI TUBING WATER 9: MIX PSI LID S.KS S.KS. Come B.B.I. Was	Jablish Cir 50/50 Poz M My 40 Surt	nix Comunica Dis	OTHER_ CASING_10'S M Thru 7" wx 2% Ge	, , , , , , , , , , , , , , , , , , ,
Altauista En MAILING ADDRESS MAILING AD	TATE ZIP C KS 66 OLE SIZE 12 RILL PIPE LURRY VOL SPLACEMENT PSI Safety M (* Pump) Kal Sal / 6 Dy 11: mg UNITS	HOLE DEI TUBING WATER 9: MIX PSI LID S.KS S.KS. Come B.B.I. Was	712 495 675 558 PTH 40 PTH 40 12/sk 50/50 Por 11 40 Surt	Fre Mad Ital Bet Mat Pac CASING SIZE & W CEMENT LEFT IN RATE 5 B P Cullation IN Comunication Casing Casing Comunication Comunicatio	TRUCK# VEIGHT 7" OTHER CASING 10' M Thru 7" WA 2% Ge	DRIVER
Wellswille OBTYPE Sunface HO CASING DEPTH 40 DE CASING DEPTH 10 CYON COSING MIX STORY COSING A COUNT CODE ACCOUNT CODE SHOTS 128	TATE ZIP C KS 66 OLE SIZE 12 RILL PIPE LURRY VOL SPLACEMENT PSI Safety M (* Pump) Kal Sal / 6 Dy 11: mg UNITS	HOLE DEI TUBING WATER 9: MIX PSI LID S.KS S.KS. Come B.B.I. Was	712 495 675 558 PTH 40 PTH 40 12/sk 50/50 Por 11 40 Surt	Fre Mad Ital Bet Mat Pac CASING SIZE & W CEMENT LEFT IN RATE 5 B P Cullation IN Comunication Casing Casing Comunication Comunicatio	VEIGHT 7" OTHER CASING 10'S M Thru 7" WX 2% Ge	<i>t</i> -
CITY ST Wellswille BOBTYPE SUNFOCE HO CASING DEPTH 40 DE CASING DEPTH 16 BBLDE REMARKS: Hold Crew COSING MIX 5% Solt 5 de COSING ALCON ACCOUNT QUANITY OF CODE SHOTS 1	TATE ZIP C KS 66 OLE SIZE 12 RILL PIPE LURRY VOL SPLACEMENT PSI Safety M (* Pump) Kal Sal / 6 Dy 11: mg UNITS	HOLE DEI TUBING WATER 9: MIX PSI LID S.KS S.KS. Come B.B.I. Was	495 675 558 PTH 40 sal/sk to 61:5 h c; y 50/50 for M 40 Surt Her . Shut h	HOLBER JEI DEN MONTROE CASING SIZE & W CEMENT LEFT IN RATE 5 B P CUI (axion Tix Comun Goe Dis N CASING	OTHER_ CASING_10'S M Thru 7" wx 2% Ge	, , , , , , , , , , , , , , , , , , ,
Well surlle OB TYPE Surface HO ASING DEPTH 40 DE LURRY WEIGHT SL ISPLACEMENT 16 BBCDE EMARKS: Hold Crew COS.Ng. Mix 5% Solly 5th COSING OLICON ACCOUNT QUANITY OF CODE 54015 1	TATE ZIP C K S OLE SIZE 12 % RILL PIPE LURRY VOL SPLACEMENT PSI Sa Fety M (Y Pump) K of Sal / 6 Dy 1 mg UNITS	HOLE DEI TUBING WATER GE MIX PSI LID SKS SKS. Come BBI. Was	1075 558 PTH 40 Hablish Cir 50/50 Poen My 40 Surt	Max Pac CASING SIZE & W CEMENT LEFT IN RATE 53 P Cul (ax) in ace Dis A Casing	OTHER_ CASING_10'S M Thru 7" wx 2% Ge	, , , , , , , , , , , , , , , , , , ,
ACCOUNT CODE SUNFOCE HOSENS DEPTH 40' DE SILVERY WEIGHT SILVERNENT 1.6 BBCDISTEMARKS: 12 Crew Casing alleans	OLE SIZE 12% RILL PIPE LURRY VOL SPLACEMENT PSI SAFETY M KALS-ALL LURRY VOL DY 111-MA UNITS	HOLE DEI TUBING WATER GE MIX PSI LID SKS SKS BBI Was DESCRIPTION	PTH 40 pal/sk Jablish cir 50/50 Poen At to Sort ter . Shut in	Max Pac CASING SIZE & W CEMENT LEFT IN RATE 5 B P CU (ax) ithan 1ix Penny ace DIS A CASMY	OTHER_ CASING_10'S M Thru 7" wx 2% Ge	, , , , , , , , , , , , , , , , , , ,
ACCOUNT CODE SUNFOCE HOSENS DEPTH 40' DE SILVERY WEIGHT SILVERNENT 1.6 BBCDISTEMARKS: 12 Crew Casing alleans	OLE SIZE 12% RILL PIPE LURRY VOL SPLACEMENT PSI SAFETY M KALS-ALL LURRY VOL DY 111-MA UNITS	HOLE DEI TUBING WATER GE MIX PSI LID SKS SKS BBI Was DESCRIPTION	PTH 40 pal/sk to blish cir 50/50 for M At to Surt ter . Shut h	CASING SIZE & W CEMENT LEFT IN RATE 5 B P CUI (axi da 1ix Comun GCO DIS A CASING	OTHER_ CASING_10'S M Thru 7" wx 2% Ge	, , , , , , , , , , , , , , , , , , ,
ASING DEPTH 40' DE LURRY WEIGHT SL ISPLACEMENT 1.6 BB CDIS EMARKS: Hold Crew COS.Ng. Mix 5% Solly 5 H COS.Ng alcox KUYY FINNEY ACCOUNT CODE QUANITY OF SHOOLS	RILL PIPE_ LURRY VOL_ SPLACEMENT PSI_ Safety YN C + Purn /) Kal S-al /: Lunts	TUBING_ WATER GO MIX PSI_ LID S.KS S.KS. Come B.B.I. Was	tablish cir 50/50 Poe M My to Surt Her . Shut h	CEMENT LEFT IN RATE 5 B P C U (a) i cha 1ix Cemu ace DIS A CASING	OTHER_ CASING_10'S M Thru 7" wx 2% Ge	, , , , , , , , , , , , , , , , , , ,
LURRY WEIGHT SL ISPLACEMENT 1.6 BB CDIS EMARKS: Hold Crew Casing alray Casing alray ACCOUNT QUANITY or 1 SHOIS 1	LURRY VOL_ SPLACEMENT PSI Safety YM (+ Pump) Kal Saal /. Lul / 1.6 Dylling UNITS	WATER GO MIX PSI_ LOS ING , Es LOS SKS SKS COMO BBI Was	tablish cir 50/50 Poen 40 Surt Her Shut h	RATE 5 B P Culladion 1ix Comunico Dis Cosmy	CASING 10'S	, , , , , , , , , , , , , , , , , , ,
EMARKS: Hold Craw (as.ly. Mix 5% Solt 5# H Casing alean Kurt Finney ACCOUNT CODE QUANITY or 1 54015	SPLACEMENT PSI Safety M Y Pump Kal S-al/1 W / 16	MIX PSI_ Led hy, Es Lld s.Ks S.Ks. Come B.B.I. Was	tablish cir 50/50 Poen 40 Surt Her Shut h	RATE 5 B P Culladion 1ix Comunico Dis Cosmy	thru 7" wx 2% Ge	, , , , , , , , , , , , , , , , , , ,
EMARKS: Hold Crew Cas.lng. Mix 5% Solly 5# H Cas.lng alean Kury Francy ACCOUNT CODE QUANITY or 1 34015	Safety m C + Pump Kal S-al/ L W/ 1.6 Drilling UNITS	LID SKS SKS. Come BBI. Was	tablish cir 50/50 Porn why to Surt ter . Shut h	Culadion 1ix Comu ace Dis acashy	thru7" wx 2% Ge place 7	, ii
Casing alean Kurt Fluney ACCOUNT QUANITY OF STYDIS 1	Val Sal/	HO SKS SKE COMP BBI Was DESCRIPTION	50/50 Porn 40 Surt Her Shut h	nix Comunica Dis	nt 2% Ge	, ii
KUNY FLANCY ACCOUNT QUANITY OF STYDIS	Drilling	BBI. Was	ter Shut h	reasing.	place >	, "
Casing aleas Kurt Fluney ACCOUNT CODE QUANITY or 1 34015	Drilling L UNITS	BBI Was	ter Shut t	Modu		
ACCOUNT QUANITY or S4015	Drilling &	DESCRIPTION	Jud	Modu		
ACCOUNT QUANITY or CODE SHOTS	UNITS	50	/			
ACCOUNT QUANITY or CODE S4015	UNITS	50	/			
ACCOUNT QUANITY or CODE SHOTS	UNITS	50	/			
ACCOUNT QUANITY or CODE SYGOIS	UNITS	50	/			
ACCOUNT QUANITY or CODE S4015	UNITS	50	/			
CODE QUANITY OF 1	A TOTAL CONTRACTOR	50	of SERVICES or PRO			
	PUME	- 17 (AN) - AND		DUCT	UNIT PRICE	TOTAL
** *** *** *** *** *** *** *** *** ***		CHARGE SU	vface Com	enx 495		870
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5407A 83.		Ton Miles	<u> </u>			11802
55020 1	Jar !	80 BBL V	lac Truck		1000	9000
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in 3737					ESTIMATED	14.
ITHORIZTION Pary		TITLE_			TOTAL DATE	1712 14

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.

CONSOLIDATED Oil Well Services, LLC

REMIT TO

Consolidated Oil Well Services, LLC Dept. 970 P.O. Box 4346 Houston, TX 77210-4346

MAIN OFFICE P.O. Box 884 Chanute, KS 66720 620/431-9210 • 1-800/467-8676 Fax 620/431-0012

INVOICE

Invoice #

264265

Invoice Date:

11/25/2013

Terms: 0/0/30, n/30

Page

ALTAVISTA ENERGY INC 4595 K-33 HIGHWAY

P.O. BOX 128

WELLSVILLE KS 66092

(785)883 - 4057

FLAKE RI-2A

44880

NE 28-22-16

11-21-2013

KS

				=======
Part Number 1124 1118B 1111 1110A 4402	Description 50/50 POZ CEMENT MIX PREMIUM GEL / BENTONITE SODIUM CHLORIDE (GRANULA KOL SEAL (50# BAG) 2 1/2" RUBBER PLUG	Qty 155.00 360.00 299.00 775.00 1.00	Unit Price 11.5000 .2200 .3900 .4600 29.5000	Total 1782.50 79.20 116.61 356.50 29.50
Description 370 80 BBL VACUU 548 TON MILEAGE 666 CEMENT PUMP 666 EQUIPMENT MI 666 CASING FOOTA	LEAGE (ONE WAY)	Hours 2.00 324.34 1.00 45.00 1101.00	Unit Price 90.00 1.41 1085.00 4.20 .00	Total 180.00 457.32 1085.00 189.00

2364.31 Freight: Parts: .00 Tax: 145.39 AR

Labor:

.00 Misc:

4421.02

.00 Total:

4421.02

Sublt:

.00 Supplies:

.00 Change:

.00

Signed

Date

BARTLESVILLE, OK 918/338-0808

EL DORADO, KS 316/322-7022

EUREKA, KS 620/583-7664

PONCA CITY, OK 580/762-2303

OAKLEY, KS 785/672-8822

OTTAWA, KS 785/242-4044

THAYER, KS 620/839-5269 GILLETTE, WY 307/686-4914

CUSHING, OK 918/225-2650



Ravin 3737

264265

TICKET NUMBER LOCATION OHICUS FOREMAN Casa Keyne

	chanute, KS 66720 or 800-467-8676	FIELD TICKE	CEMEN		ORT	•	,
DATE	CUSTOMER#	WELL NAME & NUM		SECTION	TOWNSHIP	RANGE	00111150
		-lake # RI- &					COUNTY
/// 21//3 CUSTOMER,	15047 1	-lake of 11- a	<u> </u>	NE 28	22	16	CE
Altac	cista Everau			TRUCK#	DRIVER	TRUCK#	DRIVER
MAILING ADDR	ESS J		7	729	Casken	1 Cotal	voeling
POI	BOX 198			660	Garlingo	- suery	roering
CITY	STAT	E ZIP CODE	i .	548	Mik Haa	/	
Wellow	ile K	5 66092		370	Kei Car		
JOB TYPE /		SIZE 55/8"	HOLE DEPTH		CASING SIZE & V	VEIGHT 276"	EUE
CASING DEPTH		L PIPE		ffle - 107	1'	OTHER_	
SLURRY WEIGH		RY VOL	WATER gal/sl		CEMENT LEFT in		1
DISPLACEMEN	TLO. 2 bbls DISPI	ACEMENT PSI	MIX PSI		RATE 4.56	24a	
REMARKS: L.		eting establish	ed circu	lation a	- 11		0#
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ACCOUNT CODE	QUANITY or UNI	ITS DE	SCRIPTION of	SERVICES or PRO	DDUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARG	E				1085.00
540lo	45 mi	MILEAGE					189.00
5402	1100	casing	tootoce				
5407A	324.33	8 ton u	rileace			·	457.32
2205C	2 hr		ac			· · · · · · · · · · · · · · · · · · ·	180,00
							700.
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1124	155 sk	5 50/50 !	Paruir	cement			1782.50
111180	360 #		in Gel	Center			70 0-1
1/11	299 #	Sact	in use				77.00
	775 出		1				116.61
4402	7 43 71	Folsen	Note du				356.50
~+ T112~	© ™	1 /2 Y1	INDE /YES	3	22	8	

AUTHORIZTION No Co. Rep on location I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form

TITLE_

6.159

SALES TAX

ESTIMATED TOTAL

DATE